

**TRANSMITTAL
FORM**

(To be used for all correspondence after initial filing)

Total Number of Pages in this Submission:

Application No. 08/968,208

Filing Date November 12, 1997

First Named Inventor Russell G. Higuchi

Group Art Unit 1743

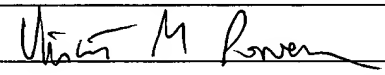
Examiner Name Snay, J.

Attorney Docket No. 4380 US

ENCLOSURES (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Notice/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers for an application <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund | <input type="checkbox"/> After-Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s): <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Check for \$ _____ <input checked="" type="checkbox"/> Authorization to Charge Deposit Account No. 01-2213 |
|--|---|---|
- Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

| | | | |
|-----------|---|-----------|--------------|
| Name | Vincent M. Powers (Registration No. 36,246) | Date | Feb 23, 2002 |
| Signature |  | Telephone | 650.638.5607 |
| Address | 850 Lincoln Centre Drive, Foster City, CA 94404 | Facsimile | 650.638.6677 |

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